Please type a plus sign (+) inside this box ^ +

UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attomey Docket No.		TI-348	89
First N	amed Inventor or Applica	tion Identifier	Eko N. Onggosanusi
Expre	ss Mail Label No.	EV333	318276US
Title	Iterative Detect	ion in MiM	O Systems

On Page 1 of the specification, before line 1, insert -This application claims priority under

35 USC § 119(e)(1) of provisional application number 60/395,604 filed 7/12/2002											
APP See MPEP Chapte	LICATION ELE	EMENTS eatent application content	DDR	ESS	TO:	Assistant Commission Box Patent Applicati Washington, DC 202	on 🗏				
Fee Trans	smittal Form (e.g., PTO/ original, and a duplicate for	SB/17)	_	6.		Microfiche	e Computer Program (Ap	ppendix) 6			
	l arrangement set forth b	[Total Pages elow)	24	7.			r Amino Acid Sequence necessary)	Submission			
•	ive title of the Invention eferences to Related Ap	plications		a. Computer Readable Copy							
	nt Regarding Fed spons				b. Paper Copy (identical to computer copy)						
	und of the Invention			c. Statement verifying identical of above copies							
	mmary of the Invention scription of the Drawings	s (if filed)		ACCOMPANYING APPLICATION PARTS							
- Detailed											
- Claim(s) - Abstract	of the Disclosure			8. Assignment Papers (cover sheet & Documents(s))							
3. X Drawing(s	s) (35 USC d113)	[Total Sheets	9]	9.			3.73(b) Statement ere is an assignee)	Power of Attorney			
4. Oath or Declaratio	n	[Total Pages		10.		English T	ranslation Document (if	applicable)			
a. Ne	ewly Executed (original o	or copy)		11.			on Disclosure at (IDS)/PTO-1449	Copies of IDS Citations			
b. Co	opy from a prior application continuation/divisional	Prelimina	ary Amendment								
	[Note Box 5 b	elow]	13.	13. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)							
i.	DELETION OF Signed statement	INVENTOR(S) ant attached deleting inve	entor(s)	14. Statement(s) Statement filed in prior application Status still proper and desired							
	named in the pi			(PTO/SB/09-12) Certified Copy of Priority Document(s) if foreign priority is claimed)							
5. Incorpora	tion By Reference (usea	ble if Box 4b is checked)		16. Other:							
the oath o	or declaration is supplied	application, from which a under Box 4b, is consider	ered as			J					
hereby inc	corporated by reference			whe	re one ha	as been filed	ed to be entitled to pay small in a prior application and is b	peing relied upon.			
								liminary amendment:			
☐Continuation	☐Division on information: E		tinuation-i	n-part	(CIP)		of prior applicatior up / Art Unit:	n No: / .			
Prior application	on information.	18. CORRE	SPONDE	NCE A	DDR						
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Correspondence address below											
NAME											
ADDRESS CITY	STATE ZIP CODE										
COUNTRY		TELEPHONE	(972) 91	7-43	65		FAX	(972) 917-4418			
Name (Print/Type)	Car	Iton H. Hoel			Reg	gistration	No. (Attorney/Agent)	29,934			
Signature	7		1/2	M			Date	7/14/03			
			*								

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Approved for use through 09/30/2000. OMB 0651-0032

Deposit Account User ID

DATE: 7/14/2003

Signature

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a col								CONCOL	Complete If Known							
FEE TRANSMITTAL									17	Application Number						
Patent fees are subject to annual revision on October 1.										Filing Date 7/14/2003						
These are the fees effective October 1, 1997										First Named Inventor Eko N. Ongg sanus			si			
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.										Examiner Name						
									_	Group / Art Unit						
TOTAL AMOUNT OF PAYMENT (\$) \$750									<u></u>	Attorney Docket No. TI-34889						
METHOD OF PAYMENT										FEE CALCULATION (continued)						
The Commissioner is hereby authorized to charge to the following Deposit Account,								3.	ADDIT	IONAL	FEES					
Deposit Account Number 20-0668						Large Fee	Entity Fee	Small Fee Code	Entity Fee	Fee	Description	Fee Paid				
Deposit Account Name Texas Instruments Incorporated						Code 105 127	(\$) 130 50	205 227	(\$) 65 25	Surcharge - late	•					
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2.	Paym	ent En	closed:						112	920*	112	920*	Requesting publication of SIR prior to Examiner action			
		Check Money Other							113	1,840*	113	1,840*	Requesting pul Examiner actio			
		FEE (CALCU	LATI	ON				115	110	215	55	Extension for re	eply within first month		
1. BAS	SIC FIL	ING FE	E						116	400	216	200	Extension of tir			
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Fee	Fee	Fee	Fee	Fee D	escription	n 1	Fee Paid		118	1,510	218 ·	755	Extension of tir	ne within fourth month		
Code	(\$)	Code	(\$)						128	2,060	228	1,030	Extension of tir	ne within fifth month		
101	740	201	370	Utilit	y filing fee	Г	\$750		119	310	219	155	Notice of Appe	al		
106	330	206	165	Desid	n filing fee	,	• •		120	310	220	155	Filing a brief in	support of an appeal		
107	510	207	255	Plant filing fee			121	270	221	135	Request for ora	al hearing				
108	740	208	370	Reissue filing fee			138	1,510	138	1,510	Petition to insti	tute a pubic use proceeding	• 			
114	160	214	80	Provisional filing fee			140	110	240	55	Petition to reviv	re - unavoidable				
OUDTOTAL (I)		141	1,320	241	660	Petition to revi	ve - unintentional									
					~~ ('')	(\$)	750		142	1,320	242	660	Utility issue fee			
2. EX	TDA CI	AIM FE	ES						143	450	243	225	Design issue fe			
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			Extra Cla	ilms —	below		Fee Paid		123	50	123	50		d to provisional application	I	
Total Claims	12	-20**=	0	×	18	=	\$00		126	240	126	240	Submission of	Information Disclosure Str	nt.	
Independent	1		0	╡ _⋆	84	=	\$00		581	40	581 :	40	Recording each patent assignment per properly (time number of properties)			
Claims Multiple Deper	ndent	- I	L	_	280	_	\$00		146	790	246	395	7			
**or number previously paid, if greater, For Reissue, see below								149	790	249	395	CFR 1.129(a)) For each additional invention to be examined (37 CFR 1.129(b))				
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Large Fee	Entity Fee	Small Fee	Entity Fee		Fee D	escric	otion									
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103	18	203	9	Claims in excess of 20						Other fee (specify)						
102	84	202	42	Indepe	ndent Clain	ns in e	xcess of 3									
104	280	204	140	Multiple dependent claims in excess of 3					1							
109 84 209 42 **Reissue independent claims over							. .		, ,							
original patent 110 18 210 9 **Reissue claims in excess of 20 and						Oth	er fee (s	specify	, <u> </u>							
over original patent SUBTOTAL (2) (\$) \$00								*Reduced by Basic Filing Fee Paid SUBTOTAL (3)								
(4) (4)												_	Complete (if app	licable)		
SUBMITTED BY																
Typed or Printed Name Carlton H. Hoel							/				Reg. Number	29,934				

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Date

14/03